PATENT A	APPLICATION	FEE DETERMINATION	RECORD
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Effective October 1, 2000

Application or Docket Number

M-9129 US

CLAIMS AS FILED - PART I						•	SMALL ENTITY			OTHER THAN									
(Column 1)			(Colui			TYPE		OR	SMALL	ENTITY									
TOTAL CLAIMS		21					RATE	FEE		RATE	FEE								
FOR		NUMBER F	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00								
TOTAL CHARGEABLE CLAIMS 2			21 minu	minus 20= * /				X\$ 9=	9	OR	X\$18=								
INDEPENDENT CLAIMS 6 minus 3 =			us 3 =	* 3			X40=	120	OR	X80=									
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=								
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2		TOTAL	484	OR	TOTAL									
CLAIMS AS AMENDED - PART II											OTHER								
		(Column 1)		(Colu		(Column 3)	<u>.</u>	SMALL	NTITY	OR	SMALL	NIIIY							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE							
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=								
	Independent	*	Minus	***	T OL A114	=		X40=		OR	X80=								
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		.	+135=		OR	+270=								
							į	TOTAL		OR	TOTAL ADDIT. FEE								
		(0.1		(Oal.	O\	(Calumn 2)		ADDIT. FEE			AUUII. FEE								
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3)			ADDI		Γ	4001							
AMENDMENT B	化液溶剂 混合分子	REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE							
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=								
	Independent	*	Minus	***		=	_	X40=		OR	X80=								
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM	<u> </u>		+135=	-	OR	+270≃								
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE								
		(0.1		(Calu	O\	(Column 2		AUDII. FEEI		•	AUDII. FEE	******							
_	FFRS TWO SEC	(Column 1) CLAIMS	14000 00000000		mn 2) HEST	(Column 3	ή,			Ī		1.55							
AMENDMENT C	40.0	REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE							
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=								
	Independent	*	Minus	***		=		X40=		OR	X80=								
L	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDEN	T CLAIM					~ ` `									
+135= OR +270=																			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE ** ADDIT. FEE																		
	The "Highest Num	nher Previously P	aid For" (Total or	Indepen	dent) is the	e highest numb	ber fo	und in the ap	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										